B1 (Official Form 1)(04/13)										
Uni	ited State Eastern D							Vol	luntary	Petition
Name of Debtor (if individual, enter Las Hossain, Rahat	st, First, Middle)	:		Name	of Joint De	ebtor (Spouse	e) (Last, First	, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						used by the I maiden, and			3 years	
Last four digits of Soc. Sec. or Individua (if more than one, state all) xxx-xx-5626 Street Address of Debtor (No. and Street			olete EIN	(if more	than one, state	f Soc. Sec. or all) F Joint Debtor				o./Complete EIN
31-05 81st Street, 2nd Floor East Elmhurst, NY	, City, and State	<i>)</i> .	ZIP Code	Succi	riddress of	Joint Deotor	(140. and 50	ect, City, a	ma state).	ZIP Code
		1	1370							Zii code
County of Residence or of the Principal Queens	Place of Busines	ss:		Count	y of Reside	ence or of the	Principal Pla	ace of Busi	ness:	
Mailing Address of Debtor (if different f	rom street addre	ss):		Mailir	g Address	of Joint Debt	tor (if differe	nt from stre	eet address):	
		Г	ZIP Code							ZIP Code
Location of Principal Assets of Business (if different from street address above):	Debtor	•		•						
Type of Debtor	,		f Business			-	of Bankrup			ch
(Form of Organization) (Check one book of Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above echeck this box and state type of entity below	ntities, ow.)	alth Care Bus gle Asset Re 1 U.S.C. § 1 lroad ckbroker nmodity Bro aring Bank	al Estate as o 01 (51B)	lefined	Chapt Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	of C	hapter 15 P a Foreign I hapter 15 P	et one box) Petition for R Main Procee Petition for R Nonmain Pr	eding Recognition
Chapter 15 Debtors	Oth							e of Debts		
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	und		he United Stat	tion es	defined "incurr	are primarily condinated in 11 U.S.C. § red by an individual, family, or	onsumer debts, § 101(8) as idual primarily	for		s are primarily ess debts.
Filing Fee (Check	one box)		Check or	ne box:		Chap	ter 11 Debt	ors		
■ Full Filing Fee attached □ Filing Fee to be paid in installments (appliattach signed application for the court's codebtor is unable to pay fee except in instal Form 3A. □ Filing Fee waiver requested (applicable to attach signed application for the court's code	nsideration certify llments. Rule 1006 chapter 7 individu	ing that the (b). See Officinals only). Mus	al De Check al Check al Ast Ast Ast Ast	ebtor is not ebtor's aggree less than applicable plan is bein	a small busing regate nonco \$2,490,925 (expression of the plan with of the plan with t		defined in 11 tages debts (except to adjustment) dependent of the adjustment of the	J.S.C. § 1010 cluding debts on 4/01/16 of	(51D). s owed to inside and every three	ders or affiliates) ee years thereafter). editors,
Statistical/Administrative Information ☐ Debtor estimates that funds will be as ☐ Debtor estimates that, after any exemthere will be no funds available for d	vailable for distr	cluded and a	administrativ		es paid,		THIS	SPACE IS I	FOR COURT	USE ONLY
Estimated Number of Creditors	1,000- 5,000	5,001- 10,000	10,001-	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets So to \$50,001 to \$100,001 to \$50,001 to \$100,000	to \$10	\$10,000,001 to \$50 million	\$50,000,001 to \$100	100,000,001 o \$500 nillion	\$500,000,001 to \$1 billion					
Estimated Liabilities	to \$10	\$10,000,001 to \$50 million	\$50,000,001 to \$100	5100,000,001 o \$500 million	\$500,000,001 to \$1 billion					

B1 (Official For	rm 1)(04/13)	_	Page 2
Voluntar	y Petition	Name of Debtor(s): Hossain, Rahat	
(This page mi	ust be completed and filed in every case)		
	All Prior Bankruptcy Cases Filed Within Last	t 8 Years (If more than two, atta	ach additional sheet)
Location Where Filed:	- None -	Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pe	ending Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If mor	re than one, attach additional sheet)
Name of Debi	tor:	Case Number:	Date Filed:
- None -		- · · · · ·	
District:		Relationship:	Judge:
	Exhibit A	(T) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Exhibit B
forms 10K a	pleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 esting relief under chapter 11.)	I, the attorney for the petitioner have informed the petitioner that 12, or 13 of title 11, United State	dividual whose debts are primarily consumer debts.) named in the foregoing petition, declare that I at [he or she] may proceed under chapter 7, 11, tes Code, and have explained the relief available ter certify that I delivered to the debtor the notice
☐ Exhibit	A is attached and made a part of this petition.	X /s/ Hector M. Roman Signature of Attorney for De Hector M. Roman	bbtor(s) January 9, 2014 (Date)
	Exh	ibit C	
	or own or have possession of any property that poses or is alleged to I Exhibit C is attached and made a part of this petition.	pose a threat of imminent and iden	tifiable harm to public health or safety?
	Exh	ibit D	
(To be comp	pleted by every individual debtor. If a joint petition is filed, ea	ch spouse must complete and at	ttach a separate Exhibit D.)
Exhibit	D completed and signed by the debtor is attached and made	a part of this petition.	
If this is a jos ☐ Exhibit	int petition: D also completed and signed by the joint debtor is attached a	and made a part of this petition.	
	Information Regardin	ng the Debtor - Venue	
	(Check any ap	=	
	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or principa a longer part of such 180 days	l assets in this District for 180 than in any other District.
	There is a bankruptcy case concerning debtor's affiliate, go	eneral partner, or partnership pe	nding in this District.
	Debtor is a debtor in a foreign proceeding and has its prince this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a de	fendant in an action or
	Certification by a Debtor Who Reside (Check all app		roperty
	Landlord has a judgment against the debtor for possession		ecked, complete the following.)
	(Name of landlord that obtained judgment)	<u> </u>	
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment to	for possession, after the judgme	nt for possession was entered, and
_	Debtor has included with this petition the deposit with the after the filing of the petition.		
	Debtor certifies that he/she has served the Landlord with the	his certification. (11 U.S.C. § 36	52(1)).

B1 (Official Form 1)(04/13) Page 3 Name of Debtor(s): **Voluntary Petition** Hossain, Rahat (This page must be completed and filed in every case) Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition petition is true and correct. is true and correct, that I am the foreign representative of a debtor in a foreign [If petitioner is an individual whose debts are primarily consumer debts and proceeding, and that I am authorized to file this petition. has chosen to file under chapter 7] I am aware that I may proceed under (Check only one box.) chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief ☐ I request relief in accordance with chapter 15 of title 11. United States Code. available under each such chapter, and choose to proceed under chapter 7. Certified copies of the documents required by 11 U.S.C. §1515 are attached. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b). ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting I request relief in accordance with the chapter of title 11, United States Code, recognition of the foreign main proceeding is attached. specified in this petition. X /s/ Rahat Hossain Signature of Foreign Representative Signature of Debtor Rahat Hossain Printed Name of Foreign Representative Signature of Joint Debtor Date Telephone Number (If not represented by attorney) Signature of Non-Attorney Bankruptcy Petition Preparer January 9, 2014 I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Date compensation and have provided the debtor with a copy of this document Signature of Attorney* and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services X /s/ Hector M. Roman chargeable by bankruptcy petition preparers, I have given the debtor notice Signature of Attorney for Debtor(s) of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. **Hector M. Roman** Official Form 19 is attached. Printed Name of Attorney for Debtor(s) Law Office of Hector M. Roman, PC Printed Name and title, if any, of Bankruptcy Petition Preparer Firm Name 37-18 73rd Street, Suite 401 Jackson Heights,, NY 11372 Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition Address preparer.)(Required by 11 U.S.C. § 110.) Email: hroman@roman-law.org (718) 533-8444 Fax: (718) 533-8460 Telephone Number January 9, 2014 Address Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Date Signature of Debtor (Corporation/Partnership) Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above. I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition Names and Social-Security numbers of all other individuals who prepared or on behalf of the debtor. assisted in preparing this document unless the bankruptcy petition preparer is The debtor requests relief in accordance with the chapter of title 11, United not an individual: States Code, specified in this petition. Signature of Authorized Individual If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. Printed Name of Authorized Individual A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in Title of Authorized Individual fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Date

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of New York

In re	Rahat Hossain		Case No.	
		Debtor(s)	Chapter	7

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	age 2
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, of through the Internet.);	
☐ Active military duty in a military combat zone.	
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.	,
I certify under penalty of perjury that the information provided above is true and correct.	
Signature of Debtor: /s/ Rahat Hossain Rahat Hossain	
Date: January 9, 2014	

Certificate Number: 15317-NYE-CC-022338697



CERTIFICATE OF COUNSELING

I CERTIFY that on November 27, 2013, at 2:59 o'clock PM PST, Rahat Hossain received from Access Counseling, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of New York, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: November 27, 2013 By: /s/Eunice Kristine Francia

Name: Eunice Kristine Francia

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of New York

In re	Rahat Hossain		Case No.	
_		Debtor		
			Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	1,220.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		28,371.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,473.96
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,160.00
Total Number of Sheets of ALL Schedu	ıles	17			
	To	otal Assets	1,220.00		
			Total Liabilities	28,371.00	

B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of New York

In re	Rahat Hossain		Case No.	
•		Debtor	,	
			Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	3,473.96
Average Expenses (from Schedule J, Line 22)	3,160.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	4,300.00

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		28,371.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		28,371.00

_		Debtor	,	
In re	Rahat Hossain		Case No.	
B6A (Offici	al Form 6A) (12/07)			

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re	Rahat Hossain		Case No.	
_		Debtor	,	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	US Currency	-	20.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X		
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Home furnishings	-	500.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Various books and pictures	-	50.00
6.	Wearing apparel.	Clothes	-	500.00
7.	Furs and jewelry.	Ring, watch	-	150.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	X		

Sub-Total > **1,220.00** (Total of this page)

² continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

_						
In	re Rahat Hossain		Debtor ,	Case N	lo	
	1	SCHEDULI	E B - PERSONAL PRO	PERTY		
			(Continuation Sheet)			
	Type of Property	N O N E	Description and Location of Pro	perty	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X				
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X				
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X				
14.	Interests in partnerships or joint ventures. Itemize.	x				
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X				
16.	Accounts receivable.	X				
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.					
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X				
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x				

Sub-Total > **0.00**(Total of this page)

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the

debtor, and rights to setoff claims. Give estimated value of each.

X

B6B (Official Form 6B) (12/07) - Cont.

In re	Rahat Hossain	Case No.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 1,220.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Rahat Hossain	Case No.
_		Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand US Currency	NYCPLR § 5205(a)(9)	20.00	20.00
Household Goods and Furnishings Home furnishings	NYCPLR § 5205(a)(5)	500.00	500.00
Books, Pictures and Other Art Objects; Collectibles Various books and pictures	NYCPLR § 5205(a)(2)	50.00	50.00
Wearing Apparel Clothes	NYCPLR § 5205(a)(5)	500.00	500.00
Furs and Jewelry Ring, watch	NYCPLR § 5205(a)(6)	150.00	150.00

Total: 1,220.00 1,220.00

B6D (Official Form 6D) (12/07)

In re	Rahat Hossain		Case No.
		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

				_	UNLIQUI	D		
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN				AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				╹	DATED			
					D	Н		
			Value \$					
Account No.								
	1							
			Value \$					
Account No.								
			Value \$					
Account No.								
	1							
	L	L	Value \$					
0			S	ubt	ota	.1		
continuation sheets attached			(Total of th	nis p	oag	ge)		
				т	ota	,	2.22	0.00
			(Report on Summary of Sci				0.00	0.00
			(Report on Building of Be	iicu	uic	ر در		

B6E (Official Form 6E) (4/13) In re Rahat Hossain Case No._ Debtor SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.) Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ■ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

B6F (Official Form 6F) (12/07)

and the second s			mo to report on and senegate r				
CREDITOR'S NAME,	CC	Н	usband, Wife, Joint, or Community	C _C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFE SO STATE	COXFLZGEZ	Q	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxx0931			Opened 8/12/04 Last Active 9/29/05 Credit Card	T N	DATED		
American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355		-	Groun Gara				0.00
Account No. xxxx3857	1	t	Opened 9/01/09	+	T		
Asset Acceptance Attn: Bankrupcy Dept Po Box 2036 Warren, MI 48090		-	Factoring Company Account Citibank				10,597.00
Account No. xxxx5202 Asset Acceptance Attn: Bankrupcy Dept Po Box 2036 Warren, MI 48090		-	Opened 6/01/09 Factoring Company Account Chase Bank/ First Usa/Chase				6,880.00
Account No. 3689 Bank Of America Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410		-	Opened 5/01/05 Last Active 4/05/07 Credit Card				Unknown
			1		<u> </u>	<u></u>	Ciikilowii
_3 continuation sheets attached			(Total of	Sub this			17,477.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Rahat Hossain	Case No
		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CDEDITORIS MAME	С	Hu	sband, Wife, Joint, or Community		ΞT	υ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	E		ЬΙ	I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxx4467			Opened 4/02/05 Last Active 10/22/09 Credit Card	T	r	A T E D	Ī	
Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899		-	Credit Card					0.00
Account No. xxxxxxxxxxx5195			Opened 3/01/05 Last Active 6/01/05	+	\dagger	1	1	
Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130		-	Credit Card					0.00
Account No. xxxxxxxx5163	t		Opened 7/01/05 Last Active 3/26/07	\top	\dagger	1		
Chase Bank One Card Serv Elgin, IL 60124		-	Credit Card					Unknown
Account No. xxxxxxxxx9402	l		Opened 4/01/04 Last Active 4/07/07	\dashv	\dagger	+	+	
Dsnb Bloomingdales Macy's Bankruptcy Dept. Po Box 8053 Mason, OH 45040		-	Charge Account					901.00
Account No. xxxxxxxx2420	<u> </u>		Opened 4/01/04 Last Active 4/30/07	\dashv	\dagger	\dashv		
Dsnb Macys 9111 Duke Blvd Mason, OH 45040		_	Charge Account					595.00
Sheet no1 of _3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	_		(Total	Sul of this			:)	1,496.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Rahat Hossain	Case No.
_		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	IS SUBJECT TO SETOFF, SO STATE.	.π II	. I	UNLIQUIDATE	빝	AMOUNT OF CLAIM
Account No. xxxxxxxx7000			Opened 8/01/11 Last Active 9/17/12			E D		
First Data 1307 Walt Whitman Rd Melville, NY 11747		-	Lease					700.00
Account No. xxxxxxxxxxxx7429			Opened 7/23/06 Last Active 6/29/07		+	\dashv		
Gecrb/Pc Richard Attn: Bankruptcy Po Box 103104 Roswell, GA 30076		-	Charge Account					
								0.00
Account No. xxxxxxxxxxxx8656 Hsbc Bank Po Box 5253 Carol Stream, IL 60197		-	Opened 4/01/05 Last Active 6/30/05 Credit Card					0.00
Account No. xxxxxxxxxxx4976	_	┝	Opened 3/01/05 Last Active 4/07/07		+	\dashv		
Hsbc Bank Po Box 5253 Carol Stream, IL 60197		-	Credit Card					Unknown
Account No. xxxxxxxxxxxx2543			Opened 4/01/04 Last Active 1/18/08		+	\dashv		
Hsbc/bsbuy Po Box 5253 Carol Stream, IL 60197		-	Charge Account					Unknown
Sheet no. 2 of 3 sheets attached to Schedule of					bto			700.00
Creditors Holding Unsecured Nonpriority Claims			(Tota	ıl of thi	s p	ag	e)	700.00

B6F (Official Form 6F) (12/07) - Cont.

In re	Rahat Hossain	Case No
		Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	S	U	P	
MAILING ADDRESS	CODEBTOR	Н		CONTI	DZLLQD.	S	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	l i	Q	Ų	AMOUNT OF CLAIM
(See instructions above.)	Ö	c	IS SUBJECT TO SETOFF, SO STATE.	N G E N			AMOUNT OF CLAIM
· ·	Ľ	_		Ϊ́τ	DATED		
Account No. xxxxxxxxxxx3689			Opened 10/01/11		Ę		
			Factoring Company Account Bank Of America N.A. Fia Card		ט		-
Lvnv Funding Llc			N.A. Fla Card				
Po Box 10497		-					
Greenville, SC 29603							
							6,716.00
Account No. xxxxxxxxxxxx0960		T	Opened 9/01/06 Last Active 3/29/07				
	l		Charge Account				
Mantis/cbsd							
Po Box 6497		-					
Sioux Falls, SD 57117							
							1,063.00
A	┝	┢	0	-	_	-	·
Account No. xxx4165	ļ		Opened 12/01/09 Factoring Company Account Hsbc Card				
			Services lii Inc				
Pinnacle Credit Service			Services in inc				
Attn: Bankruptcy		-					
Po Box 640							
Hopkins, MN 55343							040.00
							919.00
Account No.							
	1						
Account No.	┢	+		┢	\vdash	\vdash	
Account 140.	ł						
Sheet no. 3 of 3 sheets attached to Schedule of			5	Subt	ota	1	8,698.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his j	pag	ge)	0,090.00
				т	`ota	1	
			(Report on Summary of So				28,371.00
			(Report on Summary of Se	1100	uic	0)	

B6G (Offici	al Form 6G) (12/07)	
•		
In re	Rahat Hossain	Case No.
-		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

B6H (Offici	al Form 6H) (12/07)	
•		
In re	Rahat Hossain	Case No.
_		Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to identify your o	case:							
Deb	otor 1 Rahat Hoss	ain							
	otor 2 use, if filing)				_	II.			
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF NEW YORK						
	se number Jown)								
<u>O</u> 1	fficial Form B 6I					MM / DD/ Y	YYY		
So	chedule I: Your Inc	ome						12/13	
spoi	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment	ur spouse is not filing wi	ith you, do not inclu	de info	mati	on about your spe	ouse. If more space	e is needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spou	ıse	
	If you have more than one job,		■ Employed			☐ Emplo			
	attach a separate page with information about additional	Employment status	☐ Not employed	_ ` `			☐ Not employed		
	employers. Occupation		Front desk mana	ager					
	Include part-time, seasonal, or self-employed work.	Employer's name	Pan American H	otel					
	Occupation may include student or homemaker, if it applies.	Employer's address	7900 Queens Bly Elmhurst, NY 11						
		How long employed the	here? 3 years						
Par	t 2: Give Details About Mo	nthly Income	,						
spou	mate monthly income as of the cuse unless you are separated.	late you file this form. If	,					· ·	
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all	emp	loyers for that perso	on on the lines below	w. If you need	
						For Debtor 1	For Debtor 2 or non-filing spous	se_	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,673.72	\$N	<u>/A</u>	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$ <u>N</u>	<u>/A</u>	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	4,673.72	\$ <u>N/A</u>	_	

Official Form B 6I Schedule I: Your Income page 1

Debtor	1 Rahat Hossain	_	Case	number (if known)			
			For	Debtor 1	For Debto		
c	Copy line 4 here	4.	\$	4,673.72	\$	N/A	
5. L	ist all payroll deductions:						
	• •	5a.	\$	0.00	¢	NI/A	
_	a. Tax, Medicare, and Social Security deductions b. Mandatory contributions for retirement plans	5a. 5b.	\$ _	0.00	\$ \$	N/A N/A	
	c. Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	e. Insurance	5e.	\$_	0.00	\$	N/A	
5	f. Domestic support obligations	5f.	\$	0.00	\$	N/A	
5	g. Union dues	5g.	\$	0.00	\$	N/A	
5	h. Other deductions. Specify: social security	5h.+	\$	289.77	+ \$	N/A	
	medicare		\$	67.77	\$	N/A	
	Fed Income tax	_	\$	425.45	\$	N/A	
	NY Income tax	_	\$_	222.47	\$	N/A	
	NYC	_	\$_	137.97	\$	N/A	
	union dues	_	\$	56.33	\$	N/A	
6. A	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,199.76	\$	N/A	
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,473.96	\$	N/A	
88 88 88 88 88	ist all other income regularly received: a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. b. Interest and dividends c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. d. Unemployment compensation e. Social Security f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: g. Pension or retirement income h. Other monthly income. Specify: add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8c. 8d. 8e. e 8f. 8g. 8h.+	\$	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$;	3,473.96 + \$_	N/A	<u>A</u> = \$3	3,473.96
lr 0 0	State all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, you ther friends or relatives. To not include any amounts already included in lines 2-10 or amounts that are not specify:	r deper		•	ed in <i>Schea</i>	lule J. . +\$	0.00
V	add the amount in the last column of line 10 to the amount in line 11. The resolution of the Summary of Schedules and Statistical Summary of Certapplies					· —	3,473.96
13. C	Do you expect an increase or decrease within the year after you file this form No. Yes. Explain:	i?				Combine monthly	

Fill	in this information to identify	your case:				
Deb	otor 1 Rahat Hos	ssain		Check	if this is:	
	·		,	☐ Aı	n amended filing	
	otor 2 ouse, if filing)				supplement showing	post-petition chapter 13
		T A STEPLY DASTINGT OF VEW			1	Jwing date:
Uni	ted States Bankruptcy Court for	or the: EASTERN DISTRICT OF NEW	YORK	ľ	MM / DD / YYYY	
	e number known)				separate filing for De aintains a separate he	ebtor 2 because Debtor 2 ousehold
	fficial Form B 6J	<u>-</u>				
	chedule J: Your	LXPENSES possible. If two married people are filing	a tagathar both are agu	ally regnere	vible for supplying	12/13
info	ormation. If more space is ne known). Answer every questi	eded, attach another sheet to this form. on.				
1.	Is this a joint case?					
	No. Go to line 2.					
	☐ Yes. Does Debtor 2 live	in a separate household?				
	☐ No ☐ Yes. Debtor 2 m	ust file a separate Schedule J.				
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents'					□ No
	names.		Mother		65	Yes
				_		□ No
			Uncle		76	Yes
						□ No
						☐ Yes
						□ No □ Yes
3.	Do your expenses include	■ No				L Tes
	expenses of people other th yourself and your depende	an Dy				
Part		oing Monthly Expenses				
exp		ur bankruptcy filing date unless you are ankruptcy is filed. If this is a supplemen				
		non-cash government assistance if you keed it on <i>Schedule 1: Your Income</i> (Officia			Your expo	enses
4.	The rental or home owners and any rent for the ground of	ship expenses for your residence. Include or lot.	e first mortgage payments	4. \$		1,370.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
		's, or renter's insurance		4b. \$		0.00
		epair, and upkeep expenses		4c. \$		25.00
_		tion or condominium dues		4d. \$		0.00
5.	Additional mortgage paym	ents for your residence, such as home eq	uity loans	5. \$		0.00

Debtor 1	Rahat Hossain	Case num	ber (if known)	
		-		
6. Utili 1		<i>C</i> -	\$	200.00
6a.	Electricity, heat, natural gas	ба. 6b.		200.00
6b.	Water, sewer, garbage collection			0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		120.00
6d.	Other. Specify: Cable, phone, internet	6d.		130.00
	and housekeeping supplies	7.		500.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	130.00
	onal care products and services	10.	\$	0.00
1. Medi	ical and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare.	10	d.	150.00
	ot include car payments.	12.	·	
	rtainment, clubs, recreation, newspapers, magazines, and books	13.		50.00
	ritable contributions and religious donations	14.	\$	0.00
5. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.	1.5	¢	0.00
15a.	Life insurance	15a.		0.00
15b.	Health insurance	15b.		0.00
15c.	Vehicle insurance	15c.		135.00
	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci		16.	\$	0.00
	illment or lease payments:			
17a.	Car payments for Vehicle 1	17a.		300.00
17b.	Car payments for Vehicle 2	17b.		0.00
17c.	Other. Specify:	17c.		0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report a	s deducted	d.	0.00
	your pay on line 5, Schedule I, Your Income (Official Form 6I).	18.		
	er payments you make to support others who do not live with you.		\$	0.00
Speci		19.		
	er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>			0.00
20a.	Mortgages on other property	20a.	· -	0.00
20b.	Real estate taxes	20b.		0.00
20c.	Property, homeowner's, or renter's insurance	20c.		0.00
20d.	Maintenance, repair, and upkeep expenses	20d.		0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
1. Othe	r: Specify:	21.	+\$	0.00
22. Your	monthly expenses. Add lines 4 through 21.	22.	\$	3,160.00
	result is your monthly expenses.	22.	Ψ	3,100.00
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,473.96
23a. 23b.		23a. 23b.		
230.	Copy your monuny expenses from time 22 above.	250.	-φ	3,160.00
220	Subtract your monthly avanages from your monthly income			
23C.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	313.96
For ex	ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect you nortgage?		increase or decrea	se because of a modification to the to
	es. Explain:			

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Eastern District of New York

In re	Rahat Hossain			Case No.									
			Debtor(s)	Chapter	7								
	DECLARATION C	DECLARATION CONCERNING DEBTOR'S SCHEDULES											
	= = = = = = = = = = = = = = = = = = =												
	DECLARATION UNDER F	PENALTY (OF PERJURY BY INDIV	IDUAL DEF	BTOR								
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of												
	sheets, and that they are true and correct to the best of my knowledge, information, and belief.												
Date	January 9, 2014	Signature	/s/ Rahat Hossain										
			Rahat Hossain										
			Debtor										

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of New York

In re	Rahat Hossain	Hossain			
		Debtor(s)	Chapter	7	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$52,207.00 2013 YTD - employment income \$56,146.00 2012 - employment income \$44,800.00 2011 - employment income

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL **OWING**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

NAME AND ADDRESS OF CREDITOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Law Office of Hector M. Roman, PC 37-18 73rd Street, Suite 401 Jackson Heights,, NY 11372 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR November 4, 2013

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$400.00

4

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

R(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL**

SITE NAME AND ADDRESS **GOVERNMENTAL UNIT** NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six **years** immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS **ENDING DATES**

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

ADDRESS NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above. within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Q

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	January 9, 2014	Signature	/s/ Rahat Hossain
		_	Rahat Hossain
			Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court

	Eastern Distr	ict of New York			
In re Rahat Hossain				Case No.	
]	Debtor(s)	Chapter	7	
PART A - Debts secured by prop	erty of the estate. (Part A ratach additional pages if near	nust be fully comp			
Property No. 1					
Creditor's Name: -NONE-		Describe Property	Securing Debt:		
Property will be (check one): ☐ Surrendered	☐ Retained				
If retaining the property, I intend to ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11 U.S	.C. § 522(f)).		
Property is (check one): ☐ Claimed as Exempt		☐ Not claimed as e	exempt		
PART B - Personal property subject Attach additional pages if necessary.)		e columns of Part B 1	must be completed f	for each unexpired lease.	
Property No. 1					
Lessor's Name: -NONE-	Describe Leased Pro	Describe Leased Property:		Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ YES ☐ NO	
I declare under penalty of perjury personal property subject to an un		intention as to any	property of my est	ate securing a debt and/or	
Date January 9, 2014	Signature	/s/ Rahat Hossain			

Debtor

United States Bankruptcy Court Eastern District of New York

In r	re _ Rahat Hossain		Case No.						
		Debtor(s)	Chapter	7					
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR D	EBTOR(S)					
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
	For legal services, I have agreed to accept			1,350.00					
	Prior to the filing of this statement I have received		\$	400.00					
	Balance Due			950.00					
2.	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
3.	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4.	■ I have not agreed to share the above-disclosed compensation	ation with any other perso	n unless they are mer	nbers and associates	s of my law firm.				
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				y law firm. A				
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspe	cts of the bankruptcy	case, including:					
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to redurentification agreements and applications 522(f)(2)(A) for avoidance of liens on house 	ent of affairs and plan which and confirmation hearing, uce to market value; e as needed; preparation	ch may be required; and any adjourned he xemption planning	arings thereof;	nd filing of				
6.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any discharge any other adversary proceeding.	es not include the following argeability actions, jud	ng service: dicial lien avoidan	ces, relief from s	tay actions or				
	C	CERTIFICATION							
this	I certify that the foregoing is a complete statement of any ag bankruptcy proceeding.	reement or arrangement fo	or payment to me for	representation of the	e debtor(s) in				
Date	ed: January 9, 2014	/s/ Hector M. Ro	oman						
		Hector M. Roma							
		Law Office of H	ector M. Roman, F et, Suite 401	·C					
Jackson Heights,, NY 11372									
		(718) 533-8444 hroman@romar	Fax: (718) 533-840 n-law.org	50					
L			g						

Case 1-14-40101-cec Doc 1 Filed 01/09/14 Entered 01/09/14 17:46:48

United States Bankruptcy Court Eastern District of New York

In re	Rahat Hossain	Case No.		
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	January 9, 2014	/s/ Rahat Hossain
		Rahat Hossain
		Signature of Debtor
Date:	January 9, 2014	/s/ Hector M. Roman
		Signature of Attorney
		Hector M. Roman
		Law Office of Hector M. Roman, PC

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USBC-44 Rev. 9/17/98

American Express Po Box 3001 16 General Warren Blvd Malvern, PA 19355

Asset Acceptance Attn: Bankrupcy Dept Po Box 2036 Warren, MI 48090

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Bank Of America Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410

Barclays Bank Delaware Attn: Bankruptcy P.O. Box 8801 Wilmington, DE 19899

Capital 1 Bank Attn: Bankruptcy Dept. Po Box 30285 Salt Lake City, UT 84130

Chase Bank One Card Serv Elgin, IL 60124

Dsnb Bloomingdales Macy's Bankruptcy Dept. Po Box 8053 Mason, OH 45040

Dsnb Macys 9111 Duke Blvd Mason, OH 45040

First Data 1307 Walt Whitman Rd Melville, NY 11747 Gecrb/Pc Richard Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

Hsbc Bank Po Box 5253 Carol Stream, IL 60197

Hsbc Bank Po Box 5253 Carol Stream, IL 60197

Hsbc/bsbuy Po Box 5253 Carol Stream, IL 60197

Lvnv Funding Llc Po Box 10497 Greenville, SC 29603

Mantis/cbsd Po Box 6497 Sioux Falls, SD 57117

Pinnacle Credit Service Attn: Bankruptcy Po Box 640 Hopkins, MN 55343 Case 1-14-40101-cec Doc 1 Filed 01/09/14 Entered 01/09/14 17:46:48

B22A (Official Form 22A) (Chapter 7) (04/13)

In re Rah	at Hossain	
	Debtor(s)	According to the information required to be entered on this statement
Case Number:		(check one box as directed in Part I, III, or VI of this statement):
	(If known)	☐ The presumption arises.
		■ The presumption does not arise.
		☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by $\S 707(b)(2)(C)$.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
171	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	 b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/ ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of periury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the 2 purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly, Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Debtor's Spouse's the filing. If the amount of monthly income varied during the six months, you must divide the Income Income six-month total by six, and enter the result on the appropriate line. 3 Gross wages, salary, tips, bonuses, overtime, commissions. 4,300.00 Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. Debtor Spouse 0.00 \$ Gross receipts \$ Ordinary and necessary business expenses 0.00 \$ Business income Subtract Line b from Line a 0.00 Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse Gross receipts \$ 0.00 \$ Ordinary and necessary operating expenses 0.00 | \$ Rent and other real property income Subtract Line b from Line a 0.00 Interest, dividends, and royalties. 6 \$ 0.00 7 \$ Pension and retirement income. 0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that **purpose.** Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; 0.00 \$ if a payment is listed in Column A, do not report that payment in Column B. **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A 9 or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ **0.00** Spouse \$ 0.00 \$ **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse Total and enter on Line 10 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11 4,300.00 Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).

3

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$		4,300.00		
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	N				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the enter the result.	number 12 and	\$	51,600.00		
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	a. Enter debtor's state of residence: NY b. Enter debtor's household size:	3	\$	70,151.00		
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.					
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.					
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of	of this statement.				

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)						
16	Enter the amount from Line 12.					\$
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11 Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. a.				\$	
18	Current monthly income for § 70	7(b)(2). Subtract Lir	ne 17 fro	m Line 16 and enter the resu	ılt.	\$
	Part V. C.	ALCULATION	OF D	EDUCTIONS FROM	INCOME	
	Subpart A: Dec	ductions under Sta	andard	s of the Internal Revenu	e Service (IRS)	
19A	that would currently be allowed as exemptions on your federal income tax return, plus the number of any				\$	
19B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age Persons 65 years of age or older a1. Allowance per person b1. Number of persons D2. Number of persons			\$		
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			\$		

20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.				
	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$		
	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$		
	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$	
21	20B d Stand	I Standards: housing and utilities; adjustment. If you contend loes not accurately compute the allowance to which you are entit ards, enter any additional amount to which you contend you are ention in the space below:	that the process set out in Lines 20A and led under the IRS Housing and Utilities	\$	
22A	You a vehicle Check include	Standards: transportation; vehicle operation/public transportation are entitled to an expense allowance in this category regardless of the and regardless of whether you use public transportation. It the number of vehicles for which you pay the operating expense ded as a contribution to your household expenses in Line 8.	whether you pay the expenses of operating a		
	□ 0 □ 1 □ 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
22B	B Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)			\$	
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.				
	a.	IRS Transportation Standards, Ownership Costs	\$		
	h	Average Monthly Payment for any debts secured by Vehicle	¢		
	b.	1, as stated in Line 42 Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Reversed for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a end enter.			Ψ	
	a.	IRS Transportation Standards, Ownership Costs	\$		
	b.	Average Monthly Payment for any debts secured by Vehicle	\$		
	c.	2, as stated in Line 42 Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.		\$		

Other Necessary Expenses: Involuntary deductions for employment. Each are the total average monthly payoril deductions that are equired for your employment, such as retirement contributions, union dues, and uniform costs				
His insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	26	deductions that are required for your employment, such as re-	etirement contributions, union dues, and uniform costs.	\$
pay pursuant to the order of a court or administrative agency, such as spousal or child support payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: the chalf care. Enter the total average monthly amount that you actually expend on include payments for health surings accounts itself in Line 34. Other Necessary Expenses: the communication services of the amount entered in Line 19B. Do not include payments for health insurance or health sortings accounts itself in Line 34. Other Necessary Expenses: the communication services. Finer the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pages, call vaiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted any amount previously deducted any amount previously deducted any actually payments. The total average monthly expenses in dependents. Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the expense is a support of the reasonable and necessary or your septiment	27	life insurance for yourself. Do not include premiums for ir		\$
the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 30 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as buby-sitting, day care, nursery and preschool. Do not include other educational payments. 5 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reinbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19. Do not include payments for health insurance or health isavings account, and that is in excess of the amount entered in Line 19. Do not include payments for health insurance or health savings accounts listed in Line 34. 32 Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internst service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 5 Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a c below that are reasonably necessary for yourself, your spouse, or your dependents. 6 Disability Insurance 6 Disability Insurance 7 Disability Insurance 8 Disability Insurance 9 Disability Insurance 10 Disability Insurance 11 Fund do not actually expend this total amount, state your actual total average actual monthly	28	pay pursuant to the order of a court or administrative agency	y, such as spousal or child support payments. Do not	\$
childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. 3	29	the total average monthly amount that you actually expend feducation that is required for a physically or mentally challe	or education that is a condition of employment and for	\$
health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by include payments for health singus account, and that is in excess of the amount entered in Line 19B, Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication service so ther than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. S Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. A	30			\$
actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 33 Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance	31	health care that is required for the health and welfare of your insurance or paid by a health savings account, and that is in	rself or your dependents, that is not reimbursed by excess of the amount entered in Line 19B. Do not	\$
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance	32	actually pay for telecommunication services other than your pagers, call waiting, caller id, special long distance, or interr	\$	
Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents. a. Health Insurance \$	33	Total Expenses Allowed under IRS Standards. Enter the	total of Lines 19 through 32.	\$
a. Health Insurance \$ b. Disability Insurance \$ c. Health Savings Account \$ Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$		Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably r	ngs Account Expenses. List the monthly expenses in	
Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Seducation expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and	34	a. Health Insurance \$		
Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. \$ Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		b. Disability Insurance \$		
If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$		c. Health Savings Account \$	3	\$
Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25° per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		Total and enter on Line 34.		
25 expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. 26 Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. 27 Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. 28 Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and		below:	r actual total average monthly expenditures in the space	
actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and	35	expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of you	d necessary care and support of an elderly, chronically	\$
Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and	36	actually incurred to maintain the safety of your family under	\$	
actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and	37	Standards for Housing and Utilities, that you actually expendenterustee with documentation of your actual expenses, and	\$	
	38	actually incur, not to exceed \$156.25* per child, for attendar school by your dependent children less than 18 years of age. documentation of your actual expenses, and you must expense actual expenses.	nce at a private or public elementary or secondary You must provide your case trustee with plain why the amount claimed is reasonable and	\$

 $^{^{*}}$ Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.						\$
40	Cont finan	inued charitable contribution cial instruments to a charitab	ons. Enter the amount that you will continue organization as defined in 26 U.S.C. §	nue to 170(o	contribute in the $c(1)$ - (2) .	e form of cash or	\$
41	Total	l Additional Expense Deduc	tions under § 707(b). Enter the total of I	Lines	34 through 40		\$
			Subpart C: Deductions for De	bt I	Payment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.						
	a.	Name of Creditor	Property Securing the Debt	\$	verage Monthly Payment	Does payment include taxes or insurance? □yes □no	
					Γotal: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. Total: Add Lines					\$	
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as					\$	
			ases. If you are eligible to file a case under a by the amount in line b, and enter the res				
45	a. Projected average monthly chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b						\$
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.					\$	
			Subpart D: Total Deductions f	ron	Income		
47							\$
		Part VI.	DETERMINATION OF § 707(t	o)(2) PRESUMP	ΓΙΟΝ	
48						\$	
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))					\$	
50	Mon	thly disposable income unde	er § 707(b)(2). Subtract Line 49 from Line	e 48	and enter the resu	lt.	\$
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.			\$			

52	Initial presumption determination. Check the applicable box and proceed as directed. ☐ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. ☐ The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top of page 1 of this			
	statement, and complete the verification in Part VIII. You may also complete Pa The amount on Line 51 is at least \$7,475*, but not more than \$12,475*.	art VII. Do not complete the remaind	ler of Part VI.	
53	Enter the amount of your total non-priority unsecured debt		\$	
54	Threshold debt payment amount. Multiply the amount in Line 53 by the numb	er 0.25 and enter the result.	\$	
	Secondary presumption determination. Check the applicable box and proceed	as directed.		
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box of this statement, and complete the verification in Part VIII.	• •		
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54, of page 1 of this statement, and complete the verification in Part VIII. You may		on arises" at the top	
	Part VII. ADDITIONAL EXPENSE	E CLAIMS		
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare o you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.			
	Expense Description	Monthly Amour	ıt	
	a.	\$ \$	_	
	c.	\$		
	d.	\$]	
	Total: Add Lines a, b, c, and d	\$		
	Part VIII. VERIFICATIO	N		
57	I declare under penalty of perjury that the information provided in this statement <i>must sign.</i>) Date: January 9, 2014 Signature	re: /s/ Rahat Hossain Rahat Hossain (Debtor)	case, both debtors	

^{*} Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Rahat Hossain CASE NO.:
Pursuant to concerning Related	Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure Cases, to the petitioner's best knowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are ses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) days of the commencement of either of the Related Cases had, an interest in property that was or is included in the estate under 11 U.S.C. § 541(a).]
■ NO RELATED	CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
☐ THE FOLLOW!	ING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT/DIVISION:
	DING (Y/N): [If closed] Date of closing:
CURRENT STATE	US OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.)
	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN DEFENDED CASE:
2. CASE NO.:	JUDGE: DISTRICT/DIVISION:
CASE STILL PENI	DING (Y/N): [If closed] Date of closing:
CURRENT STATE	US OF RELATED CASE:
	US OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)
	ICH CASES ARE RELATED (Refer to NOTE above):
	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN DEFENDENCE CASE:
3. CASE NO.:	JUDGE: DISTRICT/DIVISION:
	DING (Y/N): [If closed] Date of closing:
CURRENT STATE	US OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)
	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY	LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN (OVER)

DISCLOSURE OF RELATED CASES (cont'd) SCHEDULE "A" OF RELATED CASE:			
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have have eligible to be debtors. Such an individual will be required to file a s			
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, A	AS APPLICABLE:		
I am admitted to practice in the Eastern District of New York (Y/N): $_$	<u>Y</u>		
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/p	petitioner's attorney, as applicable):		
I certify under penalty of perjury that the within bankruptcy case is not as indicated elsewhere on this form.	related to any case now pending or pending at any time, except		
/s/ Hector M. Roman			
Hector M. Roman Signature of Debtor's Attorney Law Office of Hector M. Roman, PC 37-18 73rd Street, Suite 401	Signature of Pro Se Debtor/Petitioner		
Jackson Heights,, NY 11372 (718) 533-8444 Fax:(718) 533-8460	Signature of Pro Se Joint Debtor/Petitioner		
	Mailing Address of Debtor/Petitioner		
	City, State, Zip Code		
Failure to fully and truthfully provide all information required by the E. other petitioner and their attorney to appropriate sanctions, including w dismissal of the case with prejudice. NOTE: Any change in address must be reported to the Court immediate result.	ithout limitation conversion, the appointment of a trustee or the		

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